File with:

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed

electronically.
Effective May 1, 2010, all statements and reports for State PACs and SHOULAY 25 AM 8: 58 Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization) FORM Muscatine County Democratic Party DR-2 DISCLOSURE IMPORTANT: Indicate by # type of committee you are reporting for: 4 (Rev. 12/2009) REPORT (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political For Office Use Only Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue Comm. # CANDIDATE COMMITTEES ONLY: Logged In-Candidate Name Political Party (if applicable) Scanned Computer Audited Office Sought District (if Senate or House) Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. 563-263-7588 SIGNATURE OF PERSON FILING REPORT I AM FILING A $_{\scriptscriptstyle \perp}05/19/2010$ REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. Indicate by # 1 (report date) ☐CHECK IF AMENDMENT TO REPORT DATED _ Local Committees, enter Date of Election Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 5,717.72 of the last reporting period or must be zero if this is first report filed.)\$ **ADD TOTAL MONEY TAKEN IN THIS PERIOD** 987.00 Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 0.00 Schedule F: Loans Received total (Attach Schedule F) 0.00 Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) 6.704.72 **SUB-TOTAL.....\$** SUBTRACT TOTAL MONEY SPENT THIS PERIOD 1,314.93 Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...... 0.00 Schedule F: Loan Repayments total (Attach Schedule F)..... 5,389.79 CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$ **UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ 62.54 **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ CONSULTANT BREAKDOWN (Schedule G Attached?) YES ___ NO **CANDIDATE COMMITTEES ONLY:** VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For I	nstruc	tions.	See	Back	of Form
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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM
Muscatine County Democratic Party		

SCHEDULE

MONETARY

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER INCOME
	ID#	Sally Meisinger		05.00	
01/04/10	CK#	2111 Bidwell Rd Muscatine, IA 52761		\$5.00	
	ID#	Widscattle, IA 52701			<u> </u>
02/01/10	CK#	Sally Meisinger 2111 Bidwell Rd		5.00	
	ID#	Muscatine, IA 52761			
03/01/10	CK#	Sally Meisinger 2111 Bidwell Rd Muscatine, IA 52761		5.00	
***************************************	ID#	Nacodamo, III 02701			l
04/01/10	СК#	Sally Meisinger 2111 Bidwell Rd Muscatine, IA 52761		5,00	
	ID#				
05/03/10	CK#	Sally Meisinger 2111 Bidwell Rd Muscatine, IA 52761		5.00	
	ID#				
01/04/10	CK#	Betty McMahon 3111 - 180th St Muscatine, IA 52761		10.00	
	1D#				
02/01/10	CK#	Betty McMahon 3111 - 180th St Muscatine, IA 52761		10.00	
***************************************	ID#				
03/01/10	CK#	Betty McMahon 3111 - 180th St Muscatine, IA 52761		10.00	
	ID#				l
04/01/10	СК#	Betty McMahon 3111 - 180th St Muscatine, IA 52761		10.00	
	ID#				
05/03/10	CK#	Betty McMahon 3111 - 180th St Muscatine, IA 52761		10.00	
		L	SUB-TOTAL	\$ 75.00	
		TOTAL (if lase	t page of this schedule)	¥	
				•	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 4 (for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
(III County Candidate's personal funds)	 CHEC	K THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)	AMEN	NDING FORM
Muscatine County Democratic Party		

SCHEDULE

MONETARY

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
01/04/10	ID# CK#	Dave & Carol Bradley 520 E 3rd St West Liberty, IA 52776		\$15.00	
02/01/10	ID# CK#	Dave & Carol Bradley 520 E 3rd St West Liberty, IA 52776		15.00	
03/01/10	ID# CK#	Dave & Carol Bradley 520 E 3rd St West Liberty, IA 52776		15.00	
04/01/10	ID# CK#	Dave & Carol Bradley 520 E 3rd St West Liberty, IA 52776		15.00	
05/03/10	ID# CK#	Dave & Carol Bradley 520 E 3rd St West Liberty, IA 52776		15.00	
1/31/10	ID# CK#	Karl Reichert 3402 Tipton Rd Muscatine, IA 52761		5.00	
02/28/10	ID# CK#	Karl Reichert 3402 Tipton Rd Muscatine, IA 52761		5.00	
03/31/10	ID# CK#	Karl Reichert 3402 Tipton Rd Muscatine, IA 52761		5.00	
04/30/10	ID# CK#	Karl Reichert 3402 Tipton Rd Muscatine, IA 52761		5.00	
01/09/10	ID# CK#	Randy Naber 402 E 8th St Muscatine, IA 52761		50.00	
			SUB-TOTAL	\$ 145.00	

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Page 2 of 4 (for Schedule A)

TOTAL (if last page of this schedule)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
Muscatine County Democratic Party	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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Reset Form

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
01/23/10	ID# CK#	Randy Naber 402 E 8th St Muscatine, IA 52761		\$50.00	
01/23/10	ID# CK#	Helen VanHoozer PO Box 1081 Muscatine, IA 52761		100.00	
01/23/10	ID# CK#	Roberta Gabbard 2698 Northwood Way Muscatine, IA 52761		25.00	
02/06/10	ID# CK#	Bonnie Adkins 2671 Tom Sawyer Rd Muscatine, IA 52761		25.00	
02/06/10	ID# CK#	Anne Hetzler 1929 Ashford Ave Muscatine, IA 52761		20.00	
02/06/10	ID# CK#	Don Paulson 2451 Jasper Ave. Letts, IA 52754		10.00	
03/13/10	ID# CK#	unitemized contributions - convention		320.00	
03/16/10	ID# CK#	unitemized contributions - meeting		43.00	
04/20/10	ID# CK#	unitemized contributions - meeting		64.00	
03/16/10	ID# CK#	Randy Naber 402 E 8th St Muscatine, IA 52761		50.00	
			SUB-TOTAL	s 707.00	1

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Page 3 of 4/(for Schedule A)

TOTAL (if last page of this schedule)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	CHEC
COMMITTEE NAME (Must be same as on Statement of Organization)	AMEN
Muscatine County Democratic Party	L

MONETARY (Rev. 07/03) **RECEIPTS** K THIS BOX IF DING FORM

SCHEDULE

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
04/20/10	ID# CK#	Randy Naber 402 E 8th St Muscatine, IA 52761		\$50.00	
04/20/10	ID# CK#	James Beach 2221 Fareway Dr Muscatine, IA 52761		10.00	
	ID# CK#	Mustamic, IA 32/01			
	ID#				
	ID#				
	CK#				
<u>.</u>	CK#				
	CK#				
	ID# CK#				
	ID# CK#				
	ID#				
			SUB-TOTAL	\$ 60.00	

TOTAL (if last page of this schedule)

(for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES				
CHECK THIS BOX IF					

_			<i>(</i> 1.4. 1.7.					
C	DMMITTEE	NAME	(Must de	same a	as on	Statement	or Organiz	zation)

Muscatine County Democratic Party

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01/06/10	ID# CK#745	City of Conesville PO Box 10 Conesville, IA 52739	caucus site rental	\$ ^{100.00}
01/12/10	ID# CK# 746	US Postal Service 3100 Cedar St. Muscatine, IA 52761	bulk rate permit	185.00
02/08/10	ID# CK# 747	Doctors Without Borders PO Box 5030 Hagerstown, MD 21741	donation - Haiti relief effort	380.00
02/19/10	ID# CK# ₇₄₈	Muscatine Comm. School 2705 Cedar St Muscatine, IA 52761	convention site rental	288.00
03/16/10	ID# CK# ₇₄₉	Helen VanHoozer PO Box 1081 Muscatine, IA 52761	convention supplies - postage	21.93
03/30/10	ID# CK# ₇₅₀	US Postal Service 3100 Cedar St. Muscatine, IA 52761	PO box rental fee	40.00
04/20/10	ID# CK# ₇₅₁	Muscatine County Fair PO Box 261 West Liberty IA 52776	tent rental fee	300.00
	ID# CK#			
			SUB-TOTAL	\$ 1214 02

SUB-101A

\$ 1314.93

TOTAL (if last page of this schedule)

\$ 1314.93

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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OR INSTRUCTIONS, SEE BACK OF FORM		SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization)		(Rev. 06/97)	IN-KIND CONTRIBUTIONS
Muscatine County Democratic Party		☐ CHEC	K THIS BOX IF
	Reset Form	AMENI	DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
03/16/10	Don Paulson 2451 Jasper Ave. Letts, IA 52754		copies of minutes	\$ 3.56	
02/16/10	Don Paulson 2451 Jasper Ave. Letts, IA 52754		copies of minutes	3.56	
01/30/10	Don Paulson 2451 Jasper Ave. Letts, IA 52754		copies of platform for convention	12.62	
01/19/10	Don Paulson 2451 Jasper Ave. Letts, IA 52754		pizza for meeting	42.80	
- Alexandra da Alexandra de Ale					
	SUB-TOTAL TOTAL (If last				
			page of this schedule)	62.54	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)